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Fill in this information to identify you	r case:	
United States Bankruptcy Court for t	he:	
Eastern District of Penn	sylvania	
Case number (If known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13	☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

06/24

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint* case—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name	Murray	
	Write the name that is on your	First name	First name
	government-issued picture identification (for example, your	<u>D.</u>	_
	driver's license or passport).	Middle name	Middle name
	Bring your picture identification to your meeting with the trustee.	Levin Last name	Last name
		Suffix (Sr., Jr, II, III)	Suffix (Sr., Jr, II, III)
2.	All other names you have		
	used in the last 8 years	First name	First name
	Include your married or maiden names and any assumed, trade names and doing business as	Middle name	Middle name
	names.	Last name	Last name
	Do NOT list the name of any		
	separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.	Business name (if applicable)	Business name (if applicable)
		Business name (if applicable)	Business name (if applicable)
3.	Only the last 4 digits of your Social Security number or	xxx - xx - <u>5</u> <u>8</u> <u>6</u> <u>9</u>	xxx - xx
	federal Individual Taxpayer	OR	OR
	Identification number (ITIN)	9xx - xx	9xx - xx

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Deb	otor 1 Murray	D.	Levin	Case number (if known)			
	First Name	Middle Name	Last Name	• /			
		About Debtor	1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Your Employer Identification						
	Number (EIN), if any.	EIN -		EIN			
				EIN			
5.	Where you live			If Debtor 2 lives at a different address:			
		303 West Av	/e				
			Street	Number Street	_		
					_		
		<u>Jenkintown</u> City	, PA 19046-2027 State ZIP Code	City State ZIP Code	_		
		Montgomery	у		_		
		County		County			
		If your mailing fill it in here. N you at this mail	address is different from the one above, ote that the court will send any notices to ing address.	If Debtor 2's mailing address is different from your it in here. Note that the court will send any notices to at this mailing address.			
		Number S	Street	Number Street	-		
		P.O. Box		P.O. Box	_		
		City	State ZIP Code	City State ZIP Code	-		
6.	Why you are choosing <i>this</i>	Check one:		Check one:			
	district to file for bankruptcy	✓ Over the la	ast 180 days before filing this petition, I in this district longer than in any other	Over the last 180 days before filing this petition, have lived in this district longer than in any other district.	l		
			ther reason. Explain. S.C. § 1408)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408)			
					-		
					-		
					_		

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Levin

Den	tor 1	Murray	D.	Levin		Case num	ber (if known)
		First Name	Middle Na	ame Last Name			
Par	t 2: Tell th	ne Court About Yo	ur Bankı	uptcy Case			
7.		er of the Bankruptcy are choosing to file	Bankrup Ch Ch Ch	one. (For a brief description of eactor (Form 2010)). Also, go to the napter 7 napter 11 napter 12 napter 13			§ 342(b) for Individuals Filing for ate box.
8.	How you w	ill pay the fee	deta chec a cre l nec to P l rec judg offic choc	tils about how you may pay. Typ ck, or money order. If your attorn edit card or check with a pre-print ed to pay the fee in installments ay The Filing Fee in Installments quest that my fee be waived (You be may, but is not required to, waital poverty line that applies to you	pically, if you are pay they is submitting you need address. S. If you choose this is (Official Form 103 ou may request this aive your fee, and mour family size and your	ving the fee yoursel- ur payment on your s option, sign and a (A). option only if you a nay do so only if you you are unable to pa	It's office in your local court for more for you may pay with cash, cashier's behalf, your attorney may pay with tach the <i>Application for Individuals</i> re filing for Chapter 7. By law, a fur income is less than 150% of the lay the fee in installments). If you <i>Filing Fee Waived</i> (Official Form
9.		iled for bankruptcy ast 8 years?	☑ No. □Yes.	District District District	WhenWhenWhen	MM / DD / YYYY MM / DD / YYYY	Case number Case number Case number
10.	pending or spouse wh case with y	nkruptcy cases being filed by a o is not filing this ou, or by a artner, or by an	☑No. □Yes.	Debtor District Debtor District	When _	M / DD / YYYY	Relationship to you Case number, if known Relationship to you Case number, if known
11.	Do you ren	t your residence?	✓ No. □ Yes.	Go to line 12. Has your landlord obtained ar No. Go to line 12. Yes. Fill out <i>Initial Statem</i> as part of this bankruptcy	ent About an Eviction		st You (Form 101A) and file it

Debtor 1

Murray

D.

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Deb	tor 1 Murray	D.	Levin		Case number (if known)
	First Name	Middle Na	me Last Name	_	
Par	First Name				
12.		☑ No. 0	Go to Part 4.		
	•	☐ Yes.	Name and location of business	S	
	business you operate as an individual, and is not a separate legal entity such as a		e of business, if any		
	corporation, partnership, or LLC	Numb	per Street		
	proprietorship, use a separate sheet and attach it to this				
	petition.	City		State	ZIP Code
		Che	ck the appropriate box to descr	ribe your business:	
			Health Care Business (as defin	ned in 11 U.S.C. § 101(27A	n))
			Single Asset Real Estate (as de	efined in 11 U.S.C. § 101(5	51B))
		 :	Stockbroker (as defined in 11 L	J.S.C. § 101(53A))	
			Commodity Broker (as defined	in 11 U.S.C. § 101(6))	
			None of the above		
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor?	appropria sheet, sta	ate deadlines. If you indicate th	at you are a small busines ow statement, and federal i	
	For a definition of small busines	s 🗹 No.	I am not filing under Chapte	er 11.	
	debtor, see 11 U.S.C. § 101(51D).	☐ No.	I am filing under Chapter 1 Bankruptcy Code.	1, but I am NOT a small bu	usiness debtor according to the definition in the
		☐ Yes.			ebtor according to the definition in the der Subchapter V of Chapter 11.
		☐ Yes.	I am filing under Chapter 1 Bankruptcy Code, and I ch		ebtor according to the definition in the bchapter V of Chapter 11.

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Debt	or 1	Murray	D.	Levin			Case number (if	known)		
		First Name	Middle Nan	ne Last Name				,		
Par	t 4: Report	if You Own or Ha	ave Any H	lazardous Property or	Any Prope	rty That Needs	Immediate At	ttention	1	
14.	•	or have any	☑ No.							
	alleged to p	at poses or is ose a threat of	☐ Yes.	What is the hazard?						_
	imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate								_	
									_	
	attention?			If immediate attention is r	needed, why	is it needed?				
		, do you own oods, or livestock								_
	that must be	fed, or a building rgent repairs?								_
				Where is the property?						_
				where is the property:	Number	Street				_
										_
					City			State	ZIP Code	_

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Debtor 1	Murray	D.	Levin	Case number (if known)
	First Name	Middle Name	Last Name	,,

Part 5 Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

☑ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

Active duty. I am currently on active military duty in a military combat zone.

reasonably tried to do so.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 25-11829 Doc 1 Filed 05/08/25 Entered 05/08/25 15:53:12 Desc Main Document Page 7 of 54

Deb	tor 1	Murray	D.	Levin		Case	number	(if known)
		First Name	Middle N	lame Last Name				
Par	t 6: Answer	These Question	s for R	eporting Purposes				
16.	What kind of have?	f debts do you	16a.			ner debts? Consumer debts are for a personal, family, or house		
			16b.			es debts? Business debts are de rough the operation of the busin		
			16c.	State the type of debts you ov	ve th	nat are not consumer debts or bu	usiness d	ebts.
17.	Are you filin	g under Chapter 7?		No. I am not filing under Cha				
	exempt prop and administ paid that fun	nate that after any erty is excluded trative expenses ar ds will be available on to unsecured				Do you estimate that after any e		
18.	How many c estimate that	reditors do you t you owe?	3	1-49	0	25,001-50,000 50,0	000-100,0	000
19.	How much d	lo you estimate you worth?	r 🔲	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
	liabilities to l		r 🗆	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Par	t 7: Sign Be	eiow						
For	ryou	If I have States C If no atto have ob I reques I unders	chosen code. I un orney rep tained an t relief in tand ma tcy case	to file under Chapter 7, I am avanderstand the relief available undersents me and I did not pay on the read the notice required by accordance with the chapter of king a false statement, conceal	ware nder or ag 11 U of title	each chapter, and I choose to pree to pay someone who is not s.S.C. § 342(b). e 11, United States Code, speciforoperty, or obtaining money or	inder Cha proceed u an attornation fied in this	apter 7, 11,12, or 13 of title 11, United under Chapter 7. ey to help me fill out this document, I spetition.
		X <u>/</u>	s/ Murr	ay D. Levin				
			•	Levin, Debtor 1				
		E:	kecuted	on <u>05/08/2025</u> MM/ DD/ YYYY				

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Debtor 1	Murray	D.	Levin	Case number (if known)
	First Name	Middle Name	Last Name	
For your attorney, if you are represented by one If you are not represented by an attorney, you do not need to file this page.		proceed under each chapter f 11 U.S.C. § 34	Chapter 7, 11, 12, or 13 or or which the person is eligi 2(b) and, in a case in whic	this petition, declare that I have informed the debtor(s) about eligibility to f title 11, United States Code, and have explained the relief available under ble. I also certify that I have delivered to the debtor(s) the notice required by h § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry with the petition is incorrect.
		X /a/ Miala	ael A. Cibik	Deta 05/00/2025
			of Attorney for Debtor	Date 05/08/2025 MM / DD / YYYY
		Printed na Cibik La Firm name	w, P.C.	
		Philadel	phia	PA 19102 State ZIP Code
		Contact pl	none (215) 735-1060	Email address cibik@cibiklaw.com
		23110		_PA
		Bar numbe	er	State

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Fill in this informa	ation to identify your			9 of 54	i	
Debtor 1	Murray	D.	Levin		1	
2001011	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Ban	kruptcy Court for the:	Eastern	District of Per	nnsylvania		
Case number						Check if this is an amended filing

UITICIAI FORM 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1:	Describe Each Residenc	e, Building, Land, or Other Real Estate	You Own or Have an	Interest In				
1.	1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?								
		No. Go to Part 2.							
	√ Y	es. Where is the property?							
	1.1	303 West Ave Street address, if available, or other	What is the property? Check all that apply. ✓ Single-family home □ Duplex or multi-unit building	Do not deduct secured clause the amount of any secure Creditors Who Have Clause	ed claims on Schedule D:				
		description	 ☐ Condominium or cooperative ☐ Manufactured or mobile home ☐ Land 	Current value of the entire property?	Current value of the portion you own?				
			☐ Investment property	\$400,560.00	\$400,560.00				
		Jenkintown, PA 19046-2027	☐ Timeshare ☐ Other	Describe the nature of you (such as fee simple, tena a life estate), if known.	•				
		County	Who has an interest in the property? Check one. Debtor 1 only	Tenants by the Entirety					
			☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☑ At least one of the debtors and another	Check if this is community property (see instructions)					
			Other information you wish to add about this ite property identification number:	m, such as local					
			Source of Value: Zillow (\$500,700 less 20% c	losing costs)					
2.			wn for all of your entries from Part 1, including any umber here		\$400,560.00				
			sterest in any vehicles, whether they are registered rehicle, also report it on Schedule G: Executory Control		s				
3.	Ca	rs, vans, trucks, tractors, sport utility	vehicles, motorcycles						
		No							
	₫	Yes							

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	3.1	Make:	Kia	Who has an interest in the property? Check	Do not deduct secured of	claims or exemptions. Put
		Madali	Niro	✓ Debtor 1 only☐ Debtor 2 only		ed claims on Schedule D: ims Secured by Property.
		Model:		Debtor 2 only Debtor 1 and Debtor 2 only	Current value of the	
		Year:	2017	☐ At least one of the debtors and another	entire property?	Current value of the portion you own?
		Approximate mileage:	70,000	Check if this is community property (see instructions)	ee \$2,875.00	\$2,875.00
		Other information:				
		Source of Value: appraisal	Car			
4.		<i>nples:</i> Boats, trailers, mo o		and other recreational vehicles, other vehicle watercraft, fishing vessels, snowmobiles, motor		
5.			-	wn for all of your entries from Part 2, includi umber here		\$2,875.00
Pa	rt 3:	Describe You	r Personal	and Household Items		
Do y	ou owr	n or have any legal or	equitable inte	rest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Hous	ehold goods and furn	ishings			
	Exam	nples: Major appliance	s, furniture, line	ns, china, kitchenware		
	☐ N	0				
	√ Y€	es. Describe		d pieces of furniture, furnishings, applia s, each valued at \$600 or less.	ances, linens, and other	\$400.00
7.	Elect	ronics				
	Exam	•		ideo, stereo, and digital equipment; computers, ncluding cell phones, cameras, media players, g	•	
	☐ N	0				
	√ Y€	es. Describe	Various use or less.	d televisions, mobile devices, and comp	outers, each valued at \$600	\$300.00
8.	Colle	ctibles of value				
	Exam			s, prints, or other artwork; books, pictures, or ot collections, memorabilia, collectibles	her art objects; stamp, coin, or	
	√ N	0				
	□ Ye	es. Describe				

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9.	Equipment for sports and hobbies						
	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments						
	☑ No						
	☐ Yes. Describe						
10.	Firearms						
	Examples: Pistols, rifles, shotguns, ammunition, and related equipment						
	☑ No						
	Yes. Describe						
11.	Clothes						
	Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories						
	□ No						
	✓ Yes. Describe	\$200.00					
12.	Jewelry						
	Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver						
	☐ No						
	√ Yes. Describe Various used pieces of jewelry.	\$50.00					
13.	Non-farm animals						
	Examples: Dogs, cats, birds, horses						
	☑ No						
	☐ Yes. Describe						
14.	Any other personal and household items you did not already list, including any health aids you did not list						
	☑ No						
	☐ Yes. Give specific						
	information						
15.	Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here	\$950.00					
		-					
Pa	rt 4: Describe Your Financial Assets						
Do y	ou own or have any legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.					
16.	Cash						
	Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition						
	☑ No						
☐ Yes Cash:							

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17.	Deposits of money							
				unts; certificates of deposit; shares in credit ur multiple accounts with the same institution, list				
	☐ No							
	√ Yes			Institution name:				
		17.1. Checking acco	ount:	TD Bank Joint Account With Wife, Account Number: XXXXXXX XXXX		\$2,557.00		
18.	Bonds, mutual funds,	or publicly traded st	tocks					
	Examples: Bond funds	s, investment accounts	s with bro	kerage firms, money market accounts				
	√ No							
	☐ Yes							
19.	Non-publicly traded s LLC, partnership, and		incorpo	rated and unincorporated businesses, incl	uding an interest in an			
	☐ No							
	✓ Yes. Give specific							
	information about them	Name of entity:			% of ownership:			
		Levin & Associa	tes, LLO	C (no assets, not operating)	100.00%	\$0.00		
20.	Government and corporate bonds and other negotiable and non-negotiable instruments							
	Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.							
	√ No							
	☐ Yes. Give specific information about							
	them							
21.	Retirement or pension	n accounts						
	Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans							
	☐ No							
	Yes. List each account separately.	Type of account:	Institu	ution name:				
		IRA:	Cha	arles Schwab Simple IRA		\$162,556.78		
22.	Security deposits and	l prepayments						
	Your share of all unused deposits you have made so that you may continue service or use from a company							
	Examples: Agreement others	s with landlords, prepare	aid rent, p	public utilities (electric, gas, water), telecommu	inications companies, or			
	√ No							
	☐ Yes							
23.	Annuities (A contract f	or a periodic payment	of money	y to you, either for life or for a number of years)			
	₫ No							
	☐ Yes							

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24.	Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).	
	√ No	
	☐ Yes	
25.	Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit	
	☑ No	
	Yes. Give specific information about them	
26.	Patents, copyrights, trademarks, trade secrets, and other intellectual property	
	Examples: Internet domain names, websites, proceeds from royalties and licensing agreements	
	☑ No	
	☐ Yes. Give specific information about them	
27.	Licenses, franchises, and other general intangibles	
	Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses	
	☑ No	
	Yes. Give specific information about them	
Mon	ey or property owed to you?	Current value of the
		portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you	
	☑ No	
	Yes. Give specific information about them, including whether you already filed the returns and the tax years	
29.	Family support	
	Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement	
	☑ No	
	☐ Yes. Give specific information	
30.	Other amounts someone owes you	
	Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else	
	☑ No	
	☐ Yes. Give specific information	

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31.	Interests in insurance policies			
	Examples: Health, disability, or life insurance	ce; health savings account (HSA); credit	t, homeowner's, or renter's insurance	
	□ No			
	Yes. Name the insurance company of each policy and list its value	Company name:	Beneficiary:	Surrender or refund value:
		Long Term Care Insurance Policy - TransAmerica	Murray D. Levin	\$0.00
		Term Life Insurance Policy, \$250,000 - Protective Life Insurance Company	Michele B. Levin	\$0.00
32.	Any interest in property that is due you f If you are the beneficiary of a living trust, ex property because someone has died.		icy, or are currently entitled to receive	
	✓ No☐ Yes. Give specific information			
33.	Claims against third parties, whether or I Examples: Accidents, employment dispute	•	a demand for payment	
	✓ No ☐ Yes. Describe each claim			
34.	Other contingent and unliquidated claims claims	s of every nature, including counterd	claims of the debtor and rights to set of	f
	₫ No			
	Yes. Describe each claim			
35.	Any financial assets you did not already	list		
	☑ No			
	Yes. Give specific information			
36.	Add the dollar value of all of your entries for Part 4. Write that number here			\$165,113.78
Pa	rt 5: Describe Any Business-F	Related Property You Own or	Have an Interest In. List any	real estate in Part 1.
37.	Do you own or have any legal or equitab	le interest in any business-related pr	operty?	
	☐ No. Go to Part 6.			
	✓ Yes. Go to line 38.			
				Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	Accounts receivable or commissions you	u already earned		
	☑ No			
	Yes. Describe			

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39.	Office equipment, furnish	nings, and supplies		
	Examples: Business-relat electronic devi	ed computers, software, modems, printers, copiers, fax machines, rug ces	s, telephones, desks, chairs,	
	☐ No			
	√ Yes. Describe	400 Greenwood Partnership: Used Office Desk and Cha would cost money to dispose of	irs (25+ years old) -	\$0.00
40.	Machinery, fixtures, equi	pment, supplies you use in business, and tools of your trade		
	√ No			
	Yes. Describe			
41.	Inventory			
	√ No			
	Yes. Describe			
42.	Interests in partnerships	or joint ventures		
	☐ No			
	Yes. Describe			
	Na	ame of entity:	% of ownership:	
		00 Greenwood Partnership (owned equally by three	33.00%	
	-	partners including debtor) (negative equity in the 400 Greenwood Ave property)	<u> </u>	\$0.00
43.	Customer lists, mailing li	sts, or other compilations		
	√ No			
	Yes. Do your lists inc	ude personally identifiable information (as defined in 11 U.S.C. § 1	01(41A)) ?	
44.	Any business-related pro	perty you did not already list		
	No			
	✓ Yes. Give specific information			
	F	900 Greenwood Avenue, Wyncote, PA 19095 (Owned by 40 Partnership) (Zillow value 599,900 - Principal Ioan balance		
	<u> </u>	equity)		\$0.00
45.		l of your entries from Part 5, including any entries for pages you ber here		\$0.00
Pa	ιι Ο.	y Farm- and Commercial Fishing-Related Property have an interest in farmland, list it in Part 1.	You Own or Have an Interest In.	
46.	Do you own or have any	legal or equitable interest in any farm- or commercial fishing-rela	ted property?	
	✓ No. Go to Part 7.			
	Yes. Go to line 47.			
52.		I of your entries from Part 6, including any entries for pages you ber here		\$0.00
Pa	rt 7: Describe All	Property You Own or Have an Interest in That You	u Did Not List Above	

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Debtor Levin, Murray D. Case number (if known)

53.	Do you have other property of any kind you did not already list?	
	Examples: Season tickets, country club membership	
	☑ No	
	Yes. Give specific information	
54.	Add the dollar value of all of your entries from Part 7. Write that number here	•e \$0.00
Pa	rt 8: List the Totals of Each Part of this Form	
55.	Part 1: Total real estate, line 2	\$400,560.00
56.	Part 2: Total vehicles, line 5 \$2,8	875.00
57.	Part 3: Total personal and household items, line 15	950.00
58.	Part 4: Total financial assets, line 36 \$165,1	113.78
59.	Part 5: Total business-related property, line 45	\$0.00
60.		\$0.00
61.	Part 7: Total other property not listed, line 54 +	\$0.00
62.	Total personal property. Add lines 56 through 61 \$168,9	938.78 Copy personal property total → \$168,938.78
63.	Total of all property on Schedule A/B. Add line 55 + line 62	\$569,498.78

Official Form 106A/B Schedule A/B: Property page 8

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Fill in this inform	Fill in this information to identify your case:							
Debtor 1	Murray	D.	Levin					
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse, if filing)	First Name	Middle Name	Last Name					
United States E	sankruptcy Court for the	Eastern	District of Pennsylvania					
Case number				D				
(if known)	<u> </u>	·		Check if this is amended filing				

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/25

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

F	Part 1: Identify the Property You Claim as Exempt							
1.	You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)							
	•	on of the property and ule A/B that lists this	Current value of the portion you own Copy the value from Schedule A/B		ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption		
	Brief description:	303 West Ave Jenkintown, PA 19046-2027	\$400,560.00	₫	\$400,560.00	_11 U.S.C. 522(b)(3)(B)		
	Line from Schedule A/B:	1.1			100% of fair market value, up to any applicable statutory limit	_		
	Brief description:	2017 Kia Niro	\$2,875.00	<u>4</u>	\$300.00	42 Pa.C.S. § 8123(a)		
	Line from Schedule A/B:	3.1			100% of fair market value, up to any applicable statutory limit			
3.	(Subject to adju		ery 3 years after that for ca	ses fil	ed on or after the date of adjustment.) 15 days before you filed this case?			

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Debtor 1

Part 2: Add	litional Page				
Brief description of the property and line on <i>Schedule A/B</i> that lists this property		Current value of the portion you own Copy the value from Schedule A/B		ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption
Brief description:	TD Bank Joint Account With Wife, Michele Levin Checking account Acct. No.: 4833	\$2,557.00	√	\$2,557.00	11 U.S.C. 522(b)(3)(B)
Line from Schedule A/B:	17			100% of fair market value, up to any applicable statutory limit	
Brief description:	Charles Schwab Simple IRA	\$162,556.78	√	\$162,556.78	42 Pa.C.S. § 8124(b)(1)(ix)
Line from Schedule A/B:	21			100% of fair market value, up to any applicable statutory limit	

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Fill in this inform	nation to identify your ca	ase:		
Debtor 1	Murray	D.	Levin	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the	e: Eastern	District of Pennsylvania	
Case number (if			
known)				Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - Mo. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

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		Do	<u>cument</u> P	age 20 of 54			
Fill in this inforr	nation to identify your ca	ase:					
Debtor 1	Murroy	D.	Levin				
Deptor I	Murray First Name	Middle Name	Last Name				
5 1	riistranic	Wildale Name	Last Hame				
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name				
(Opodoo ,g	/ Filst Name	Middle Name	Last Name				
United States	Bankruptcy Court for the	e: Eastern	District o	of Pennsylvania	<u> </u>		
Case number							
(if known)							t if this is an
						amend	ded filing
Official For	<u>m 106E/F</u>						
Schedu	ile F/F: Cre	editors Who	n Have U	Insecure	d Claims		12/15
Seriede	110 12/1 : 010	artors with	o nave o	TISCCUI C	a Olaiiiis	<u>, </u>	12/13
Form 106A/B) a claims that are	nd on <i>Schedule G: Ex</i> listed in <i>Schedule D:</i> (ries in the boxes on th	s or unexpired leases ecutory Contracts and Creditors Who Have Control te left. Attach the Cont	l Unexpired Lease: laims Secured by l	s (Official Form 106 Property. If more sp	6G). Do not includ pace is needed, co	le any creditors with p opy the Part you need	partially secured I, fill it out,
Part 1:	List All of Your PRI	ORITY Unsecured (Claims				
1. Do any cr	editors have priority u	nsecured claims agair	nst you?				
☑ No. Go	to Part 2.	•	•				
Yes.							
Part 2:	List All of Your NO!	NPRIORITY Unsecu	red Claims				
	•	ity unsecured claims a	•				
☐ No. Yo ☐ Yes	u have nothing to repor	t in this part. Submit this	s form to the court w	ith your other sched	ules.		
Y res							
nonpriority included in	unsecured claim, list th	cured claims in the alpose creditor separately for e creditor holds a partic ge of Part 2.	r each claim. For ea	ich claim listed, iden	tify what type of cla	aim it is. Do not list clair	ms already
							Total claim
4.1 Amex			Last 4 digits o	f account number	3 1 5	3	\$10,660.00
	v Creditor's Name		_		<u> </u>	<u> </u>	\(\frac{\partial}{1000000000000000000000000000000000000
•	ondence/Bankrupto	ev	When was the	debt incurred?	4/1/1997		
PO Box	•	.,					
Number	Street		 As of the date 	you file, the claim	is: Check all that a	ıpply.	
			Contingent				
City	, TX 79998-1540 State	ZIP Code	Unliquidate	d			
·			Disputed				
	rred the debt? Check	one.	Type of NONP	RIORITY unsecure	d claim:		
☑ Debto	•		☐ Student loa				
☐ Debto	r 2 only r 1 and Debtor 2 only				aration agreement	or divorce that you did	not report as
	r 1 and Deptor 2 only st one of the debtors an	d another	priority clair				-
-	k if this claim is for a c			ension or profit-shari	ng plans, and other	similar debts	
		unity wool		CreditCard			
ls the cla ☑ No	im subject to offset?						
Y IVO							

☐ Yes

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Debtor 1

Pa	rt 2: Your NONPRIORITY Unsecured Claims –	- Continuation Page
After	listing any entries on this page, number them beginnin	g with 4.4, followed by 4.5, and so forth.
4.2	Amex	Last 4 digits of account number 1 3 9 3 \$4,627.00
	Nonpriority Creditor's Name	<u> </u>
	Correspondence/Bankruptcy	When was the debt incurred? 3/1/2019
	PO Box 981540	•
	Number Street	As of the date you file, the claim is: Check all that apply.
	El Paso, TX 79998-1540	☐ Contingent
	City State ZIP Code	- ☐ Unliquidated ☐ Disputed
	Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ✓ No □ Yes	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify CreditCard
4.3	Barclays Bank Delaware	Last 4 digits of account number 7 8 2 5 \$8,491.00
	Nonpriority Creditor's Name	
	Attn: Bankruptcy	When was the debt incurred? 7/1/2012
	125 S West St	•
	Number Street	As of the date you file, the claim is: Check all that apply.
	Wilmington, DE 19801-5014	☐ Contingent
	City State ZIP Code	- ☐ Unliquidated ☐ Disputed
	Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? ✓ No Yes	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify CreditCard

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Debtor 1

Part 2: Your NONPRIORITY Unsecured Claims	s — Continuation Page		
After listing any entries on this page, number them beginn	ning with 4.4, followed by 4.5, and so forth		Total claim
4.4 Citi/L.L. Bean	Last 4 digits of account number	5 2 4 2	\$1,357.00
Nonpriority Creditor's Name	_		
Attn: Citicorp Centralized Bankruptcy	When was the debt incurred?	10/1/2013	
PO Box 790040			
Number Street	As of the date you file, the claim is: C	heck all that apply.	
Sioux Falls, SD 57117-0040	Contingent		
City State ZIP Cod	UnliquidatedDisputed		
Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ✓ No □ Yes ✓ Citibank	Type of NONPRIORITY unsecured cla ☐ Student loans ☐ Obligations arising out of a separation priority claims ☐ Debts to pension or profit-sharing ple ☑ Other. Specify CreditCard	on agreement or divorce that y	you did not report as
Nonpriority Creditor's Name			 ,
Citicorp Cr Srvs/Centralized Bankruptcy	When was the debt incurred?	12/1/2023	
PO Box 790040	_		
Number Street	As of the date you file, the claim is: C	heck all that apply.	
Saint Louis, MO 63179-0027	Contingent		
City State ZIP Cod	Unliquidated Disputed		
Who incurred the debt? Check one. ✓ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ✓ No	Type of NONPRIORITY unsecured class ☐ Student loans ☐ Obligations arising out of a separation priority claims ☐ Debts to pension or profit-sharing plents ☐ Other. Specify CreditCard	on agreement or divorce that y	ou did not report as
☐ Yes			

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Case number (if known)

Debtor 1

MurrayD.LevinFirst NameMiddle NameLast Name

Pa	Your NONPRIORITY Unsecured Claims	− Continuation Page	
Afte	listing any entries on this page, number them beginning	ng with 4.4, followed by 4.5, and so forth.	Total claim
4.6	Citibank/Sears Nonpriority Creditor's Name Citicorp Cr Srvs/Centralized Bankruptcy PO	Last 4 digits of account number 5 7 7 6 When was the debt incurred? 9/1/2008	\$1,592.00
	Box 790040 Number Street St Louis, MO 63179-0040 City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not priority claims Debts to pension or profit-sharing plans, and other similar debts CreditCard	t report as
4.7	✓ No ☐ Yes Discover Financial Nonpriority Creditor's Name Attn: Bankruptcy	Last 4 digits of account number 9 5 8 4 When was the debt incurred? 1/1/2019	\$4,194.00
	2500 Lake Cook Rd Number Street Riverwoods, IL 60015-3851 City State ZIP Code	 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed 	
	Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ✓ No	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did no priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify CreditCard	t report as
	☐ Yes		

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Debtor 1

Pa	rt 2: Your NONPRIORITY Unsecured Claims —	- Continuation Page	
After	listing any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so forth. Total claim	1
4.8	Goldman Sachs Bank USA	Last 4 digits of account number 8 6 2 8 \$2,312.0)0
	Nonpriority Creditor's Name	When was the debt incurred? 10/1/2019	
	Attn: Bankruptcy	10/1/2019	
	200 West St		
	Number Street	As of the date you file, the claim is: Check all that apply.	
	New York, NY 10282-2102	☐ Contingent - ☐ Unliquidated	
	City State ZIP Code	☐ Disputed	
	Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ✓ No □ Yes	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify ☐ CreditCard	
4.9	Jpmcb Nonpriority Creditor's Name MailCode LA4-7100 700 Kansas Lane	Last 4 digits of account number 5 6 4 5 \$2,466.0 When was the debt incurred? 8/1/2013	10
	Number Street	As of the date you file, the claim is: Check all that apply.	
	Monroe, LA 71203 City State ZIP Code Who incurred the debt? Check one.	☐ Contingent ☐ Unliquidated ☐ Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim: Student loans	
	 □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset?	 ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify CreditCard	
	☑ No □ Yes		

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Debtor 1

Afte	er listing any entries on this page, number them beginnin	g with 4.4, followed by 4.5, and so forth. Total claim						
4.10	Mitchell R Owen	Last 4 digits of account number\$850.00						
	Nonpriority Creditor's Name	When was the debt incurred?						
708 Preston Road		When was the dept incurred:						
	Number Street	·						
		As of the date you file, the claim is: Check all that apply.						
	Glenside, PA 19038	Contingent						
	City State ZIP Code	- ☐ Unliquidated ☐ Disputed						
	Who incurred the debt? Check one.	·						
	☑ Debtor 1 only	Type of NONPRIORITY unsecured claim:						
	Debtor 2 only	☐ Student loans						
	Debtor 1 and Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 						
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts						
	☐ Check if this claim is for a community debt	☑ Other. Specify						
	Is the claim subject to offset?							
	☑ No							
	☐ Yes							
4.11								
4.11	NASA rederal Credit Union	Last 4 digits of account number 0 9 0 0 \$12						
	Nonpriority Creditor's Name	When was the debt incurred? 9/1/2016						
	Attn: Bankruptcy							
	500 Prince Georges Blvd	As at the date can file the elements Oberland Albertage						
	Number Street	As of the date you file, the claim is: Check all that apply.						
		☐ Contingent						
	Number Street	☐ Contingent ☐ Unliquidated						
	Number Street Upper Marlboro, MD 20774	☐ Contingent ☐ Unliquidated ☐ Disputed						
	Number Street Upper Marlboro, MD 20774 City State ZIP Code Who incurred the debt? Check one.	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim:						
	Number Street Upper Marlboro, MD 20774 City State ZIP Code	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans						
	Number Street Upper Marlboro, MD 20774 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only	 □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as 						
	Number Street Upper Marlboro, MD 20774 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	 □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims 						
	Number Street Upper Marlboro, MD 20774 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	 □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as 						
	Number Street Upper Marlboro, MD 20774 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	 □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts 						
	Number Street Upper Marlboro, MD 20774 City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	 □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts 						

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Debtor 1

Part 2: Your NONPRIORITY Unse	ecured Claims	– Continuation Page		
After listing any entries on this page, number	per them beginning	ng with 4.4, followed by 4.5, and so fo	orth.	Total claim
4.12 Republic First Bank Nonpriority Creditor's Name		Last 4 digits of account number When was the debt incurred?	3 8 4 2 11/12/2019	\$650,000.00
Two Liberty Place 50 S 16th Street Suite 2400 Number Street Philadelphia, PA 19102 City State Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and anoth Check if this claim is for a community the claim subject to offset? No Yes		As of the date you file, the claim is Contingent Unliquidated Disputed Type of NONPRIORITY unsecured of Student loans Obligations arising out of a separa priority claims Debts to pension or profit-sharing Other. Specify Personal Guar Property	claim: ation agreement or divorce that y	·
4.13 Syncb/Care Credit Nonpriority Creditor's Name Attn: Bankruptcy PO Box 965060 Number Street		Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is Contingent	2 0 5 6 9/1/2017 : Check all that apply.	\$3,255.00
Orlando, FL 32896-5060 City State Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anoth Check if this claim is for a community the claim subject to offset?		Unliquidated ☐ Disputed Type of NONPRIORITY unsecured of Student loans ☐ Obligations arising out of a separa priority claims ☐ Debts to pension or profit-sharing ☐ Other. Specify CreditCard	ation agreement or divorce that y	ou did not report as

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Debtor 1

Pa	rt 2: Your NONPRIORITY Unsecured Claims –	- Continuation Page					
Afte	listing any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so forth. Total claim					
4.14	Syncb/Venmo	Last 4 digits of account number 4 2 9 8 \$8,383.00					
	Nonpriority Creditor's Name	<u> </u>					
	Attn: Bankruptcy	When was the debt incurred? 7/1/2023					
	P.O. Box 965064						
	Number Street	As of the date you file, the claim is: Check all that apply.					
	Orlando, FL 32896-5060	☐ Contingent					
	City State ZIP Code	- ☐ Unliquidated ☐ Disputed					
	Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ✓ No □ Yes	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify CreditCard					
4.15	Synovus Bank Nonpriority Creditor's Name Attn: Bankruptcy	Last 4 digits of account number 6 2 6 0 \$4,359.00 When was the debt incurred? 7/1/2017					
	1111 Bay Avenue	-					
	Number Street	As of the date you file, the claim is: Check all that apply.					
	Columbus, GA 31901	Contingent					
	City State ZIP Code	- ☐ Unliquidated ☐ Disputed					
	Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ✓ No □ Yes	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify CreditCard					

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Debtor 1

Æ	Your NONPRIORITY Unsecured Claims –	- Continuation Page
After	listing any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so forth. Total claim
4.16	TD Bank, N.A.	Last 4 digits of account number 1 7 6 5 \$4,621.00
	Nonpriority Creditor's Name	<u> </u>
	Attn: Bankruptcy	When was the debt incurred? 5/1/2013
	32 Chestnut Street PO Box 1377	
	Number Street	As of the date you file, the claim is: Check all that apply.
	Lewiston, ME 04243	Contingent
	City State ZIP Code	UnliquidatedDisputed
	Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ✓ No □ Yes	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify CreditCard
4.17	US Bank/RMS	Last 4 digits of account number \$4.696,00
	Nonpriority Creditor's Name	When was the debt incurred? 10/1/2023
	Attn: Bankruptcy	When was the debt incurred? 10/1/2023
	PO Box 5229	
	Number Street	As of the date you file, the claim is: Check all that apply.
	Cincinnati, OH 45201-5229	☐ Contingent ☐ Unliquidated
	City State ZIP Code	☐ Disputed
	Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ✓ No	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify CreditCard

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Debtor 1

Part 2: Your NONPRIORITY Unsecured Claims —	Continuation Page
After listing any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so forth. Total claim
4.18 Us Bk Cacs Nonpriority Creditor's Name Attn: Bankruptcy	Last 4 digits of account number 4 5 2 4 \$4,696.00 When was the debt incurred? 10/25/2023
PO Box 5229 Number Street Cincinnati, OH 45201-5229	As of the date you file, the claim is: Check all that apply. Contingent
City State ZIP Code	☐ Unliquidated☐ Disputed
Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify CreditCard
Is the claim subject to offset? ☑ No ☑ Yes	

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__ Case number (if known) __

Debtor 1

MurrayD.LevinFirst NameMiddle NameLast Name

Part 4:	Add 1	the Amounts for Each Type of Unsecured Claim			
		ats of certain types of unsecured claims. This information is a soft secured claim.	s for st	atist	ical reporting purposes only. 28 U.S.C. § 159.
					Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a.		\$0.00
	6b.	Taxes and certain other debts you owe the government	6b.		\$0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.		\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	+	\$0.00
	6e.	Total. Add lines 6a through 6d.	6e.		\$0.00
					Total claim
Total claims from Part 2	6f.	Student loans	6f.		\$0.00
nom Fait 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.		\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.		\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	+	\$732,247.00
	6j.	Total. Add lines 6f through 6i.	6j.		\$732,247.00

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Fill in this inform	ation to identify your o	ease:				
Debtor 1	Murray	D.	Levin			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States E	Bankruptcy Court for th	ne: Eastern	District	of Pennsylvania		
Case number (if known)					[Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - 🗹 No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or co	mpany with whom you have th	ne contract or lease	State what the contract or lease is for
2.1				
	Name			
	Number	Street		
	City	State	ZIP Code	
2.2				
	Name			
	Number	Street		
	City	State	ZIP Code	
2.3				
	Name			
	Number	Street		
	City	State	ZIP Code	
2.4				
	Name			
	Number	Street		
	City	State	ZIP Code	

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				<u>Document</u> Page 3	32 of 54	
Fill in	this inform	ation to identify you	ur case:			
Debt	or 1	Murray	D.	Levin		
		First Name	Middle Name	Last Name		
Debt		First Name				
(Spot	ise, ii iiiiig)	First Name	Middle Name	Last Name		
Unite	ed States E	Bankruptcy Court fo	or the: Easte	Per District of Per	nnsylvania_	
Case (if kno	e number own)					Check if this is an amended filing
		n 106H				
Sch	nedu	le H: You	ır Codebto	rs		12/15
iling to	ogether, b tries in the). Answer	ooth are equally re boxes on the left every question.	sponsible for supplyir i. Attach the Additiona	ng correct information. If more	e space is needed, copy the p of any Additional Pages,	es possible. If two married people are e Additional Page, fill it out, and number write your name and case number (if
••	✓ No ☐ Yes	ave any codebions	s: (II you are lilling a joil	it case, do not list etiller spouse	s as a codebior.)	
2.	California Mo. G	, Idaho, Louisiana, o to line 3. Did your spouse, for	Nevada, New Mexico, F	nunity property state or territo Puerto Rico, Texas, Washington, quivalent live with you at the time	, and Wisconsin.)	ates and territories include Arizona,
			nity state or territory did	I you live?	Fill in the name a	and current address of that person.
	N	Name of your spouse, former spouse, or legal equivalent				
	N	umber	Street			
	C	ity	State	ZIP Code		
3.	2 again a	s a codebtor only	if that person is a gua	rantor or cosigner. Make sure	you have listed the credite	with you. List the person shown in line or on <i>Schedule D</i> (Official Form 106D), or <i>Schedule G</i> to fill out Column 2.
	Column 1	: Your codebtor			Column 2: The cred	ditor to whom you owe the debt
					Check all schedules	s that apply:
3.1				_		
	Name				Schedule D, line	
	Number		Street		Schedule E/F, lii	
	City		Stata	710.7	Schedule G, line	
0.01	City		State	ZIP (J04 6	
3.2	Name				Schedule D, line	e
	. 101110				Schedule E/F, lii	ne
	Number		Street		Schedule G, line	

State

ZIP Code

City

I in this inform	ation to identify yo	ur case:		
Debtor 1	Murray	D.	Levin	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	Check if this is:
United States E	Bankruptcy Court fo	or the: Eastern	District of Pennsy	A supplement showing postpetition
Case number				13 income as of the following dat
(if known)				MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

this form. On the top of any addition						1 a separate sneet to	
Part 1: Describe Employr	ment						
Fill in your employment information.		Debtor 1			Debtor 2 or non-	filing spouse	
If you have more than one job, attach a separate page with information about additional employers.	Employment status	✓ Employed☐ Not employed		✓ Employed☐ Not employed			
Include part-time, seasonal, or self-employed work.	Occupation	Substitute Teacher					
Occupation may include student or homemaker, if it applies.	Employer's name	Substitute Teacher Service, Inc.		Congregation Adath Jeshurun			
, , , ,	Employer's address	PO Box 37		7763 Old York	7763 Old York Road		
		Number	Street		Number Stree	et	
		Media, PA 19063			Elkins Park, PA	Elkins Park, PA 19027	
		City	State	e ZIP Code	City	State ZIP Code	
	How long employed there?	Since Nov	ember 2	2023		_	
Part 2: Give Details Abou	it Monthly Income						
Estimate monthly income as of unless you are separated.	the date you file this form. If	you have noth	ing to repo	ort for any line, write	\$0 in the space. Includ	le your non-filing spouse	
If you or your non-filing spouse ha below. If you need more space, a			ormation fo	or all employers for t	that person on the lines		
				For Debtor 1	For Debtor 2 or non-filing spous	e	
List monthly gross wages, sala deductions). If not paid monthly, or the same of the s	• .		2.	\$2,910.00	\$335.1	6	
3. Estimate and list monthly overt	ime pay.		3. +	\$0.00	+\$0.0	<u>00</u>	
4. Calculate gross income. Add lin	ne 2 + line 3.		4.	\$2,910.00	\$335.16	<u>:</u>	

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Debtor 1

				For Debtor 1	For Debtor 2 or non-filing spouse	
	Cop	y line 4 here→	4.	\$2,910.00	\$335.16	
5.	List	all payroll deductions:				
		Tax, Medicare, and Social Security deductions	5a.	\$538.95	\$43.89	
		Mandatory contributions for retirement plans	5b.	\$0.00	\$0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$0.00	\$0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$0.00	\$0.00	
	5e.	Insurance	5e.	\$0.00	\$0.00	
	5f.	Domestic support obligations	5f.	\$0.00	\$0.00	
	5g.	Union dues	5g.	\$0.00	\$0.00	
	5h.	Other deductions. Specify:	5h. +	\$0.00	+\$0.00	
6.		I the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$538.95	\$43.89	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$2,371.06	\$291.27	
8.	List	all other income regularly received:				
	8a.	Net income from rental property and from operating a business, profession, or farm				
		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$0.00	\$0.00	
	8b.	Interest and dividends	8b.	\$0.00	\$0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive				
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$0.00	\$0.00	
	8d.	Unemployment compensation	8d.	\$0.00	\$0.00	
	8e.	Social Security	8e.	\$3,102.60	\$0.00	
	8f.	Other government assistance that you regularly receive				
		Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.				
		Specify:	8f.	\$0.00	\$0.00	
	8g.	Pension or retirement income	8g.	\$0.00	\$0.00	
	8h.	Other monthly income. Specify:	8h. +	\$0.00	+ \$0.00	
9.	Add	l all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$3,102.60	\$0.00	
10		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.	10.	\$5,473.66	\$291.27	\$5,764.93
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.						
		cify:		. , .	11. +	\$0.00

Entered 05/08/25 15:53:12 Desc Main Case 25-11829 Filed 05/08/25 Doc 1 Page 35 of 54 Document Debtor 1 Murray D. Levin Case number (if known) First Name Middle Name Last Name 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. \$5,764.93 12. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? ✓ No. Yes. Explain:

Official Form 106l Schedule I: Your Income page 3

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8a. Attached Statement **Business Income - Levin & Associates** FINANCIAL REVIEW OF THE DEBTOR'S BUSINESS (NOTE: ONLY INCLUDE information directly related to the business operation.) PART A - ESTIMATED AVERAGE FUTURE GROSS MONTHLY INCOME: \$0.00 1. Gross Monthly Income: PART B - ESTIMATED AVERAGE FUTURE MONTHLY EXPENSES: 2. Payments to be Made Directly by Debtor to Secured Creditors for Pre-Petition **Business Debts** \$0.00 TOTAL PAYMENTS TO SECURED CREDITORS 3. Other Expenses \$0.00 TOTAL OTHER EXPENSES \$0.00 4. TOTAL MONTHLY EXPENSES (Add item 2 - 21) PART C - ESTIMATED AVERAGE NET MONTHLY INCOME: \$0.00 5. AVERAGE NET MONTHLY INCOME (Subtract item 22 from item 1)

Official Form 106l Schedule I: Your Income page 4

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Fill in this informatio	n to identify your case	:		
Debtor 1	Murray	D.	Levin	Check if this is:
Debtor 2	First Name	Middle Name	Last Name	☐ An amended filing
(Spouse, if filing)	First Name	Middle Name	Last Name	A supplement showing postpetition chapt expenses as of the following date:
United States Bank	cruptcy Court for the:	Easte	ern District of Pennsylva	
Case number				MM / DD / YYYY
(if known)				

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	art 1: Describe Your Household	d			
1.	Is this a joint case?				
	No. Go to line 2. Yes. Does Debtor 2 live in a sep No Yes. Debtor 2 must file	arate household? Official Form 106J-2, Expenses for	Separate Household of Debtor 2.		
2.	Do you have dependents?	✓No	·		
	Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
	Do not state the dependents' names.				No. Yes.
					No. Yes.
					No. Yes.
				-	. ☐ No. ☐ Yes.
					- No. Yes.
3.	Do your expenses include expenses of people other than yourself and your dependents?	☑ No □ _{Yes}			
Pa	art 2: Estimate Your Ongoing N	Monthly Expenses			
			using this form as a supplement in a eck the box at the top of the form an		
	clude expenses paid for with non-carch			You	ur expenses
4.	The rental or home ownership experts for the ground or lot.	enses for your residence. Include t	first mortgage payments and any rent	4	\$0.00
	If not included in line 4:				
	4a. Real estate taxes			4a	\$1,000.00
	4b. Property, homeowner's, or rent	er's insurance		4b	\$283.00
	4c. Home maintenance, repair, and	d upkeep expenses		4c	\$50.00
	4d. Homeowner's association or co	ondominium dues		4d	\$0.00

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Debtor 1

 Murray
 D.
 Levin
 Case number (if known)

 First Name
 Middle Name
 Last Name

	Yo	our expenses
Additional mortgage payments for your residence, such as home equity loans	5. <u> </u>	\$0.00
Utilities:		
6a. Electricity, heat, natural gas	6a	\$50.00
6b. Water, sewer, garbage collection	6b.	\$100.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c	\$330.00
6d. Other. Specify:	6d.	\$0.00
Food and housekeeping supplies	7.	\$940.00
Childcare and children's education costs	8	\$0.00
Clothing, laundry, and dry cleaning	9.	\$220.00
Personal care products and services	10.	\$200.00
Medical and dental expenses	11.	\$660.00
Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$250.00
Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$150.00
Charitable contributions and religious donations	14.	\$0.00
Insurance.		
Do not include insurance deducted from your pay or included in lines 4 or 20.	45-	\$190.00
15a. Life insurance	15a	\$0.00
15b. Health insurance 15c. Vehicle insurance	15b	\$579.00
	15c	
15d. Other insurance. Specify:	15d	\$0.00
Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		
Specify:	16.	\$0.00
Installment or lease payments:		
17a. Car payments for Vehicle 1	17a	\$0.00
17b. Car payments for Vehicle 2	17b	\$0.00
17c. Other. Specify: Wife's Car Payment	17c	\$320.00
17d. Other. Specify: Long Term Care Insurance	17d	\$404.19
Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18. <u></u>	\$0.00
Other payments you make to support others who do not live with you.		
Specify:	19.	\$0.00
Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income	e.	
20a. Mortgages on other property	20a	\$0.00
20b. Real estate taxes	20b	\$0.00
20c. Property, homeowner's, or renter's insurance	20c	\$0.00
20d. Maintenance, repair, and upkeep expenses	20d	\$0.00
20e. Homeowner's association or condominium dues	20e.	\$0.00

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Debtor 1 Murray D. Levin Case number (if known) _ Middle Name First Name Last Name 21. Other. Specify: 21. +____ \$0.00 22. Calculate your monthly expenses. 22a. \$5,726.19 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22b. \$0.00 22c. Add line 22a and 22b. The result is your monthly expenses. 22c. \$5,726.19 23. Calculate your monthly net income. 23a. \$5,764.93 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. 23b. Copy your monthly expenses from line 22c above. \$5,726.19 23c. Subtract your monthly expenses from your monthly income. \$38.74 The result is your monthly net income. 23c. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? **✓** No. Yes.

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Fill in this information	to identify your case:		
Debtor 1	Murray	D.	Levin
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankro	uptcy Court for the:	Easte	ern District of Pennsylvania
Case number (if known)			

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

☐ Check if this is an amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all

of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your originate. New Summary and check the box at the top of this page.	al forms, you must fill out a
Part 1: Summarize Your Assets	
	Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B)	\$400.500.00
1a. Copy line 55, Total real estate, from Schedule A/B	\$400,560.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$168,938.78
1c. Copy line 63, Total of all property on Schedule A/B	\$569,498.78
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	\$0.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+\$732,247.00
Your total liabilities	\$732,247.00
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I)	\$5,764.93
Copy your combined monthly income from line 12 of Schedule I	Ψο,τοπ.σο_
5. Schedule J: Your Expenses (Official Form 106J)	
Copy your monthly expenses from line 22c of Schedule J	\$5,726.19

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Debtor 1	Murray	D.	Levin		Case number (if known)	
			Document	Page 41 of 54		

Last Name

First Name

Middle Name

Part 4: Answer These Questions for Administrative and Statistical	Records
6. Are you filing for bankruptcy under Chapters 7, 11, or 13? ☐ No. You have nothing to report on this part of the form. Check this box and s ☑ Yes	submit this form to the court with your other schedules.
 7. What kind of debt do you have? ✓ Your debts are primarily consumer debts. Consumer debts are those "incufamily, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for stati ✓ Your debts are not primarily consumer debts. You have nothing to report of this form to the court with your other schedules. 	stical purposes. 28 U.S.C. § 159.
8. From the Statement of Your Current Monthly Income: Copy your total current n Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	nonthly income from Official \$3,424.86
9. Copy the following special categories of claims from Part 4, line 6 of Schedule	e E/F: Total claim
From Part 4 on Schedule E/F, copy the following:	
9a. Domestic support obligations (Copy line 6a.)	<u>\$0.00</u>
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	<u>\$0.00</u>
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6	Sc.) \$0.00
9d. Student loans. (Copy line 6f.)	<u>\$0.00</u>
9e.Obligations arising out of a separation agreement or divorce that you did no claims. (Copy line 6g.)	ot report as priority \$0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line	6h.) + \$0.00
9g. Total . Add lines 9a through 9f.	\$0.00

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Fill in this information	to identify your case	:		
Debtor 1	Murray	D.	Levin	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankr	uptcy Court for the:	Easte	rn District of Pennsylvania	<u>i </u>
Case number (if known)				
(II KIIOWII)				

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT an at	torney to help you fill out bankruptcy forms?
☑ No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have read the s	ummary and schedules filed with this declaration and that they are true and correct.
Y	
/s/ Murray D. Levin Murray D. Levin, Debtor 1	-
Muliay D. Levill, Debior 1	
Date <u>05/08/2025</u>	
MM/ DD/ YYYY	

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Fill in this information	to identify your case:				
Debtor 1	Murray	D.	Levin		
	First Name	Middle Name	Last Name	_	
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name	_	
United States Bankr	ruptcy Court for the:	Easte	rn District of Pennsylvania		
Case number (if known)					

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/25

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

What is your current marital status?				
✓ Married				
☐ Not married				
2. During the last 3 years, have you lived ar	nywhere other than where y	ou live now?		
☑ No				
Yes. List all of the places you lived in the	ne last 3 years. Do not includ	le where you live now.		
3. Within the last 8 years, did you ever live veritories include Arizona, California, Idaho,				
✓ No	Louisiaria, Nevada, New Me	skico, i deito itico, iekas, vi	vasilington, and vvisconsii)
_				
Yes. Make sure you fill out Schedule H.	: Your Codebtors (Official Fo	orm 106H).		
= 1001 mane care you mile at come and re-	·	,		
		·		
	ncome	,		
·	ncome	, 		
art 2: Explain the Sources of Your I	ent or from operating a bus			years?
art 2: Explain the Sources of Your I 4. Did you have any income from employment of income you receive	ent or from operating a bus	esses, including part-time a	ctivities.	years?
eart 2: Explain the Sources of Your I 4. Did you have any income from employment of income you receive	ent or from operating a bus	esses, including part-time a	ctivities.	years?
4. Did you have any income from employme Fill in the total amount of income you receive f you are filing a joint case and you have income you have any income you have y	ent or from operating a bus	esses, including part-time a	ctivities.	years?
art 2: Explain the Sources of Your I 4. Did you have any income from employme ill in the total amount of income you receive f you are filing a joint case and you have inc No	ent or from operating a bus	esses, including part-time a	ctivities.	years?
A. Did you have any income from employmers. If you are filling a joint case and you have income.	ent or from operating a bus d from all jobs and all busin ome that you receive togeth	esses, including part-time a	ctivities. ebtor 1.	years? Gross Income
art 2: Explain the Sources of Your I 1. Did you have any income from employme ill in the total amount of income you receive f you are filing a joint case and you have inc	ent or from operating a bus d from all jobs and all busing ome that you receive togeth	esses, including part-time a er, list it only once under De	ctivities. ebtor 1. Debtor 2	
A. Did you have any income from employmer Fill in the total amount of income you receive if you are filing a joint case and you have inc	ent or from operating a bus d from all jobs and all busin ome that you receive togeth Debtor 1 Sources of income	esses, including part-time a er, list it only once under De Gross Income (before deductions and	Debtor 2 Sources of income	Gross Income (before deductions and exclusions)

			Documer	nt Page 44 of 54		
btor 1	Murray	D.	Levin		Case number (if know	/n)
	First Name	Middle Na	ame Last Name			
For last cale	•	2024	✓ Wages, commissions, bonuses, tips	<u>\$16,771.00</u>	☐ Wages, commissions, bonuses, tips	
(January 1 t	to December 31, _	YYYY)	Operating a business		Operating a business	
	endar year before		☑ Wages, commissions, bonuses, tips	\$16,083.00	☐ Wages, commissions, bonuses, tips	
(January 1 t	to December 31,	<u>2023</u>) YYYY	Operating a business		Operating a business	
nclude incom public benefit iling a joint ca No	e regardless of w payments; pension	hether that incons; rental inc		of other income are alimony oney collected from lawsuits		rity, unemployment, and othe d lottery winnings. If you are
_			Debtor 1		Debtor 2	
			Sources of income Describe below.	Gross income from each source	Sources of income Describe below.	Gross Income from each source
				(before deductions and exclusions)		(before deductions and exclusions)
	ary 1 of current your ded for bankruptcy		Social Security	\$12,410.40		
For last cale	endar year: to December 31,	2024)	Social Security	\$37,231.20		
(January 1 t	o December 31,	YYYY				
	endar vear hefore		Social Security	\$37,231.00		
For the cale	-					
	to December 31,	YYYY				
	-					
(January 1 t	to December 31,	YYYY	ade Before You Filed fo	or Bankruptcy		
(January 1 t	to December 31,	YYYY ents You M		or Bankruptcy		
(January 1 t	Certain Paymo	ents You M	orimarily consumer debts?		fined in 11 U.S.C. § 101(8) a	s "incurred by
(January 1 to the control of the con	Certain Paymo Debtor 1's or Debtor 1 non individual prima	ents You M tor 2's debts p or Debtor 2 h rily for a perso	orimarily consumer debts? as primarily consumer debonal, family, or household pu	ots. Consumer debts are de urpose."		s "incurred by
(January 1 to Art 3: List Are either D No. N an D	Certain Paymonetor 1's or Debtor 1's or Debtor 1 n individual prima uring the 90 days	ents You M tor 2's debts p or Debtor 2 h rily for a person s before you fil	orimarily consumer debts?	ots. Consumer debts are de urpose."		s "incurred by
(January 1 t	Certain Paymoneto Debtor 1's or Debtor 1 n individual prima uring the 90 days No. Go to line 7	ents You M tor 2's debts p or Debtor 2 h rily for a perso s before you file	orimarily consumer debts? as primarily consumer debonal, family, or household pulled for bankruptcy, did you p	ots. Consumer debts are defured are defured are defured are desired are defused as any creditor a total of \$8	8,575* or more?	
(January 1 t	Certain Paymo Debtor 1's or Debtor 1 non individual prima uring the 90 days No. Go to line 7 Yes. List below paid that	ents You M tor 2's debts p or Debtor 2 h rily for a perso s before you file w each credite c creditor. Do r	orimarily consumer debts? as primarily consumer debonal, family, or household pu	ots. Consumer debts are defurpose." Deay any creditor a total of \$8 Of \$8,575* or more in one of the support obligations,	3,575* or more? r more payments and the to	tal amount you
(January 1 t	Certain Paymoneto Debtor 1's or Debtor 1 n individual prima uring the 90 days No. Go to line 7 Yes. List below paid that not include	ents You M tor 2's debts p or Debtor 2 h rily for a perso s before you fil w each credite c creditor. Do r de payments	orimarily consumer debts? as primarily consumer debtonal, family, or household pulled for bankruptcy, did you put to whom you paid a total and include payments for doi	ots. Consumer debts are desurpose." oay any creditor a total of \$8 of \$8,575* or more in one of mestic support obligations, support options are desired.	3,575* or more? r more payments and the to such as child support and al	tal amount you
(January 1 t	Certain Paymoneto Debtor 1's or Debtor 1 n individual prima uring the 90 days No. Go to line 7 Yes. List below paid that not include	ents You M tor 2's debts p or Debtor 2 h rily for a perso s before you fil w each credite c creditor. Do r de payments	orimarily consumer debts? as primarily consumer debonal, family, or household puled for bankruptcy, did you put to whom you paid a total ont include payments for dorto an attorney for this bankruptcy.	ots. Consumer debts are desurpose." oay any creditor a total of \$8 of \$8,575* or more in one of mestic support obligations, support options are desired.	3,575* or more? r more payments and the to such as child support and al	tal amount you
(January 1 t	Certain Paymoneto Debtor 1's or Debtor 1 n individual prima uring the 90 days No. Go to line 7 Yes. List below paid that not include	ents You M tor 2's debts p or Debtor 2 h rily for a perso s before you fil w each credite c creditor. Do r de payments	orimarily consumer debts? as primarily consumer debonal, family, or household puled for bankruptcy, did you put to whom you paid a total ont include payments for dorto an attorney for this bankruptcy.	ots. Consumer debts are desurpose." oay any creditor a total of \$8 of \$8,575* or more in one of mestic support obligations, support options are desired.	3,575* or more? r more payments and the to such as child support and al	tal amount you

	Case 25-		Document	Entered 05/08/25 15:53:12 Desc Main Page 45 of 54
Debtor 1	Murray	D.	Levin	Case number (if known)
	First Name	Middle Name	Last Name	
√ Yes.		or 2 or both have prima s before you filed for b	•	ny creditor a total of \$600 or more?
	☑ No. Go to line	7.		
	include		support obligations, suc	00 or more and the total amount you paid that creditor. Do not h as child support and alimony. Also, do not include payments to
Insiders inc you are an	clude your relatives; officer, director, per	any general partners; rson in control, or owner	relatives of any general er of 20% or more of their	a a debt you owed anyone who was an insider? partners; partnerships of which you are a general partner; corporations of which voting securities; and any managing agent, including one for a business you support obligations, such as child support and alimony.
✓No				
□Yes I	ist all payments to	an insider		
		ed for bankruptcy, did aranteed or cosigned b		s or transfer any property on account of a debt that benefited an insider?
√ No	,ee e debie ga	a. a	, y a	
	int all normants the	at han afitad an incider		
Tes. L	list all payments the	at benefited an insider.		
Part 4: Id	entify Legal Act	tions, Repossessic	ns, and Foreclosure	S
	n matters, including			suit, court action, or administrative proceeding? orces, collection suits, paternity actions, support or custody modifications, and
√ No				
☐ Yes. F	Fill in the details.			
	1 year before you f nat apply and fill in t		as any of your property	repossessed, foreclosed, garnished, attached, seized, or levied?
√ No. G	o to line 11.			
☐ Yes. F	Fill in the information	n below.		
_				
	•	filed for bankruptcy, cause you owed a deb		ng a bank or financial institution, set off any amounts from your accounts or
√ No				
□Yes F	Fill in the details.			
_ 100.1	iii iii tile details.			
		iled for bankruptcy, wan, or another official?		in the possession of an assignee for the benefit of creditors, a court-
✓No	,			
Yes				
162				

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ebtor 1). 	Levin		Case number (if kn	own)
		Middle Name	Last Name			
Part 5: Lis	st Certain Gifts and C	Contributions				
13. Within 2	years before you filed fo	or bankruptcy, d	lid you give any gifts wit	h a total value of mor	e than \$600 per person?	
√ No						
	::::::::::::::::::::::::::::::::::::::	:11				
☐ Yes. FI	ill in the details for each g	ιπ.				
14. Within 2	years before you filed fo	or bankruptcy, d	lid you give any gifts or	contributions with a t	otal value of more than \$	600 to any charity?
√ No						
□Yes Fi	ill in the details for each g	ift or contribution	n			
	iii iii iiio dolallo for odolf g	in or contribution				
Part 6: Lis	st Certain Losses					
15. Within 1	vear before you filed for	bankruptcy or	since you filed for bank	ruptov. did vou lose a	nything because of theft,	fire, other disaster, or
gambling?	,,			aproj, ala jou loco a	,	
√ No						
🔲 Yes. Fi	ill in the details.					
Port 7: Lie	st Certain Payments	or Transfore				
art 7. Lis	st certain r dyments	or manarers				
about seeki	ing bankruptcy or prepar attorneys, bankruptcy pe	ing a bankrupto	y petition?			y to anyone you consulted
- Voc Ei	ill in the details.					
Y 1es. Fi	iii iii trie details.					
Cibik La	aw, P.C.	Descripti	on and value of any prop	perty transferred	Date payment or transfer was made	Amount of payment
Person Who	o Was Paid	Attorney	's Fee; Attorney's Co	sts	02/20/2025	¢2 500 00
	alnut Street Suite 900				03/28/2025	\$3,500.00
Number	Street				03/28/2025	\$575.00
Philade	lphia, PA 19102					
City	State ZIP Co	de				
mail@c	ibiklaw.com					
	ebsite address					
- N/I	M I I I D (1711 ()					
Person Who	o Made the Payment, if Not \	ou				
help you de	year before you filed for al with your creditors or de any payment or transf	to make payme	nts to your creditors?	ing on your behalf pa	ay or transfer any propert	y to anyone who promised to
√ No						
☐ Yes. Fi	ill in the details.					

			Doc 1 Filed 05 Docur	nent F	Page 47 of 54			
tor 1	Murray	D.	Levin			Case number (if	known)	
	First Name	Middle	e Name Last Nam	ne				
			nkruptcy, did you sell, tra	ide, or other	wise transfer any pr	roperty to anyone, othe	er than pro	perty transferred in
	urse of your busin		ncial affairs? rs made as security (such	as the grant	ting of a security inte	arest or mortgage on vo	ur propert	W
			have already listed on thi			orest of mortgage on ye	ar propert	,
□No								
_								
Yes. Fill	I in the details.							
			Description and value	of property	•	property or payments		Date transfer was
AEJ Ren	stal II.C		transferred Real Property, Multi-far	nily homo		lebts paid in exchange ler Received \$482,668		made
	Received Transfer		Property Address: 301			iei Neceiveu \$402,000		04/17/2024
332 Walr	aut St		Jenkintown PA 19046					
	Street		_Sales Price: \$552,500					
Jenkinto City	own, PA 19046-2 State	2624 ZIP Code	_					
Jity	State	ZIF Code						
Person's re	elationship to you							
Buyer			_					
nese are o	D years before you fiten called asset-p		ankruptcy, did you transf levices.)	er any prope	erty to a self-settled	trust or similar device	of which	you are a beneficiar
No Yes. Fill Yes. Fill Within 1 y transferre clude checl nds, coope	I in the details. t Certain Finan year before you find? king, savings, mor	cial Acco		afe Depos	sit Boxes, and Sto	orage Units d in your name, or for y	our benef	it, closed, sold, mov
No Yes. Fill Yes. Fill Within 1 y transferre clude checl nds, coope	I in the details. t Certain Finan year before you fi d? king, savings, more ratives, association	cial Acco	bunts, Instruments, S kruptcy, were any financi	afe Depos ial accounts ts; certificate	sit Boxes, and Sto	orage Units d in your name, or for y in banks, credit unions,	rour benef , brokerage	it, closed, sold, mov
No Yes. Fill Yes. Fill Within 1 y transferre clude checl inds, coope	I in the details. t Certain Finan year before you fi d? king, savings, more ratives, association	cial Acco	bunts, Instruments, S kruptcy, were any financi or other financial accounter financial institutions.	afe Depos ial accounts ts; certificate	sit Boxes, and Sto or instruments held as of deposit; shares	orage Units d in your name, or for y in banks, credit unions, or Date account v closed, sold, n	our benef , brokerago was	it, closed, sold, move houses, pension Last balance before closing or
No Yes. Fill Within 1: transferre clude check dds, coope No Yes. Fill	I in the details. t Certain Finan year before you fi ed? king, savings, more ratives, association	cial Acco	bunts, Instruments, S kruptcy, were any financi or other financial accounter financial institutions.	afe Depos ial accounts ts; certificate	sit Boxes, and Store or instruments helders of deposit; shares	orage Units d in your name, or for y in banks, credit unions,	our benef , brokerago was	it, closed, sold, move houses, pension Last balance
No Yes. Fill Within 1: transferre Flude check dds, coope No Yes. Fill TD Bank	I in the details. t Certain Finan year before you fi d? king, savings, more ratives, association	cial Acco	bunts, Instruments, S kruptcy, were any financi or other financial accounter financial institutions. Last 4 digits of accour	afe Depos ial accounts ts; certificate	sit Boxes, and Stores or instruments helder of deposit; shares Type of account instrument	orage Units d in your name, or for y in banks, credit unions, or Date account v closed, sold, n	our benef , brokerago was	it, closed, sold, move houses, pension Last balance before closing or
No Yes. Fill Within 1 y transferre clude check dods, coope No Yes. Fill TD Bank Name of Fin	I in the details. t Certain Finan year before you fi ed? king, savings, more ratives, association I in the details.	cial Acco	bunts, Instruments, S kruptcy, were any financi or other financial accounter financial institutions.	afe Depos ial accounts ts; certificate	sit Boxes, and Store or instruments held as of deposit; shares Type of account instrument	orage Units d in your name, or for y in banks, credit unions, or Date account y closed, sold, n transferred	our benef , brokerago was	it, closed, sold, move houses, pension Last balance before closing or transfer
No Yes. Fill Within 1 y transferre Clude check dods, coope No Yes. Fill TD Bank Name of Fin	I in the details. I Certain Finan year before you find details, more actives, association I in the details. I in the details.	cial Acco	bunts, Instruments, S kruptcy, were any financi or other financial accounter financial institutions. Last 4 digits of accour	afe Depos ial accounts ts; certificate	sit Boxes, and Stores or instruments held as of deposit; shares Type of account instrument Checking Savings	orage Units d in your name, or for y in banks, credit unions, or Date account y closed, sold, n transferred	our benef , brokerago was	it, closed, sold, move houses, pension Last balance before closing or transfer
No Yes. Fill No Within 1 y transferre clude check hds, coope No Yes. Fill TD Bank Name of Fin	I in the details. t Certain Finan year before you fi ed? king, savings, more ratives, association I in the details.	cial Acco	bunts, Instruments, S kruptcy, were any financi or other financial accounter financial institutions. Last 4 digits of accour	afe Depos ial accounts ts; certificate	Sit Boxes, and Store or instruments held as of deposit; shares Type of account instrument Checking Savings Money market	orage Units d in your name, or for y in banks, credit unions, or Date account y closed, sold, n transferred	our benef , brokerago was	it, closed, sold, move houses, pension Last balance before closing or transfer
hese are of No No Yes. Fill It 8: List Within 1: transferre Clude check Inds, coope No Yes. Fill TD Bank Name of Fin 7000 Tar	I in the details. I Certain Finan year before you find details, more actives, association I in the details. I in the details.	cial Acco	bunts, Instruments, S kruptcy, were any financi or other financial accounter financial institutions. Last 4 digits of accour	afe Depos ial accounts ts; certificate	sit Boxes, and Stores or instruments held as of deposit; shares Type of account instrument Checking Savings	orage Units d in your name, or for y in banks, credit unions, or Date account y closed, sold, n transferred	our benef , brokerago was	it, closed, sold, move houses, pension Last balance before closing or transfer
TD Bank Name of Fin Number	I in the details. I certain Finan year before you find? king, savings, more ratives, association I in the details. USA N.A. lancial Institution get Parkway No	cial Acco	bunts, Instruments, S kruptcy, were any financi or other financial accounter financial institutions. Last 4 digits of accour	afe Depos ial accounts ts; certificate	Sit Boxes, and Store or instruments held as of deposit; shares Type of account instrument Checking Savings Money market	orage Units d in your name, or for y in banks, credit unions, or Date account v closed, sold, n transferred 04/07/2025	our benef , brokerago was	it, closed, sold, move houses, pension Last balance before closing or transfer
No Yes. Fill No Within 1 yernsferre Clude checleds, coope No Yes. Fill TD Bank Name of Fin 7000 Tar Number	I in the details. It Certain Finan year before you find? king, savings, more ratives, association I in the details. I in the details. CUSA N.A. Inancial Institution reget Parkway No Street	cial Acco	bunts, Instruments, S kruptcy, were any financi or other financial accounter financial institutions. Last 4 digits of accour	afe Depos ial accounts ts; certificate	Sit Boxes, and Stores or instruments held as of deposit; shares Type of account instrument Checking Savings Money market Brokerage	orage Units d in your name, or for y in banks, credit unions, or Date account v closed, sold, n transferred 04/07/2025	our benef , brokerago was	it, closed, sold, move houses, pension Last balance before closing or transfer
hese are of No No Yes. Fill Tt 8: List No. Within 1 yes transferre clude check che	I in the details. It Certain Finan year before you find? king, savings, more ratives, association I in the details. USA N.A. hancial Institution rget Parkway Notes Street	cial Acco	bunts, Instruments, S kruptcy, were any financi or other financial accounter financial institutions. Last 4 digits of accour	afe Depos ial accounts ts; certificate	Sit Boxes, and Stores or instruments held as of deposit; shares Type of account instrument Checking Savings Money market Brokerage	orage Units d in your name, or for y in banks, credit unions, or Date account v closed, sold, n transferred 04/07/2025	our benef , brokerago was	it, closed, sold, move houses, pension Last balance before closing or transfer

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Debtor 1	Murray	D.	Levin	Case number (if k	nown)
	First Name	Middle Name	Last Name		
21. Do you valuables?	now have, or did y	ou have within 1 year	before you filed for bank	uptcy, any safe deposit box or other deposi	tory for securities, cash, or other
√ No					
Yes. F	II in the details.				
	u stored property	in a storage unit or pl	ace other than your home	within 1 year before you filed for bankrupto	ey?
√ No					
Yes. F	II in the details.				
Part 9: Ide	entify Property	You Hold or Contro	ol for Someone Else		
23. Do you	hold or control any	property that someo	ne else owns? Include ar	y property you borrowed from, are storing f	or, or hold in trust for someone.
√ No					
Yes. F	II in the details.				
Part 10: G	iive Details Abo	ut Environmental	Information		
		e following definitions			
substan	ces, wastes, or ma		, soil, surface water, groun	oncerning pollution, contamination, releases dwater, or other medium, including statutes o	
or utilize	e it, including dispo	sal sites.	·	ental law, whether you now own, operate, or	
pollutan	t, contaminant, or s	similar term.		ardous waste, hazardous substance, toxic su	ubstance, hazardous material,
Report all n	otices, releases, a	nd proceedings that y	ou know about, regardles	s of when they occurred.	
	governmental uni	t notified you that you	u may be liable or potentia	lly liable under or in violation of an environ	mental law?
√ No					
Yes. F	II in the details.				
-	u notified any gov	ernmental unit of any	release of hazardous ma	erial?	
√ No					
☐ Yes. F	II in the details.				
-	u been a party in a	ny judicial or adminis	strative proceeding under	any environmental law? Include settlement	s and orders.
√ No					
Yes. F	II in the details.				

	Case 25-118	329 I	Doc 1	Filed 05/08/2			/08/25 15:53:12 4	Desc Main
ebtor 1	Murray	D.		Levin	r ago 10	0.0	Case number (if k	(nown)
	First Name	Middle N	ame	Last Name		-	Oase Humber (# #	(HOWH)
art 11: Give	Details About \	Your Bus	siness or	Connections to	Any Business	5		
7. Within 4 yea	rs before you filed	l for bank	ruptcy, did	you own a busine	ss or have any of	f the fo	llowing connections to a	ny business?
☐ A sole	proprietor or self-e	employed	in a trade,	profession, or other	r activity, either fu	ıll-time	or part-time	
✓ A mer	nber of a limited lia	bility com	pany (LLC)) or limited liability p	artnership (LLP)			
☑ A part	ner in a partnership)						
☐ An off	icer, director, or ma	anaging ex	xecutive of	a corporation				
☐ An ow	ner of at least 5%	of the voti	ing or equit	y securities of a cor	poration			
☐ No. None o	of the above applie	s. Go to F	Part 12.	•				
				ils below for each b	ousiness.			
	vood Partnershi			the nature of the b			Employer Identification Do not include Social S	
Name				sset Real Estate 101(51B))	(as defined in	11	EIN:	
400 Greenv	vood Ave		Name of	accountant or book	kkeeper		Dates business existed	
Number Str							F 00/20/4000 T	
Wyncote, P	A 19095-1825						From <u>09/29/1998</u> T	0
City		Code						
	sociates, LLC		Describe	the nature of the b	usiness		Employer Identification Do not include Social S	
Name	Name			ctice			EIN:	
			Name of	accountant or book	kkeeper		Dates business existed	
Number Stre	eet						From <u>04/16/2002</u> To	o <u>05/27/2023</u>
City	State ZIP	Code						
28. Within 2 year creditors, or oth		l for bank	ruptcy, did	you give a financia	al statement to a	nyone a	about your business? Inc	clude all financial institutions,
√ No								
□Voc Fill in	the details below							

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Debtor 1

Murray	D.	Levin	Case number (if known)
First Name	Middle Name	Last Name	

Part 12: Sign Below	
I have read the answers on this <i>Statement of Financial Affairs</i> and any attachments, and I do and correct. I understand that making a false statement, concealing property, or obtaining n bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or b	noney or property by fraud in connection with a
/s/ Murray D. Levin Signature of Murray D. Levin, Debtor 1 Date 05/08/2025	
Did you attach additional pages to your <i>Statement of Financial Affairs for Individuals Filing</i> ☑ No ☐ Yes	for Bankruptcy (Official Form 107)?
Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy ✓ No ☐ Yes. Name of person	forms? Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this information to identify your case:						
Debtor 1	Murray	D.	Levin			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name	_		
United States Bankruptcy Court for the:		Easte	rn District of Per	nsylvania		
Case number (if known)						

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

exempt on Schedule C?

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

List Your Creditors Who Have Secured Claims
 For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.
 Identify the creditor and the property that is collateral
 What do you intend to do with the property that secures Did you claim the property as

a debt?

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t 2: List	Your Unexpired	l Personal Property	Leases	
rmation b	elow. Do not list rea	al estate leases. Unexp		tracts and Unexpired Leases (Official Form 106G), fill in the line effect; the lease period has not yet ended. You may assume a.
Describe y	our unexpired pers	sonal property leases		Will the lease be assumed?
Lessor's na	me:			☐ No
· · ·				Yes
Description property:	of leased			
Lessor's na	me:			☐ No
Description property:	of leased			☐ Yes
Lessor's na	me:			☐ No
Description property:	of leased			☐ Yes
_essor's na	me:			☐ No
Description or operty:	of leased			Yes
Lessor's na	me:			☐ No
Description or operty:	of leased			☐ Yes
_essor's na	me:			☐ No
Description property:	of leased			☐ Yes
_essor's na	me:			☐ No
Description property:	of leased			☐ Yes
t 3: Sign	n Below			
	lty of perjury, I decla at is subject to an u		d my intention about any property	y of my estate that secures a debt and any personal

Date 05/08/2025

MM/ DD/ YYYY

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of Pennsylvania

In re	ı	Levin, Murray D.							
						Case No.			
Debt	or					Chapter	7	<u></u>	
			DISCLOSURE	E OF COMPENS	SATION OF A	TTORNEY F	OR DEBTO	PR	
1.	cor	mpensation paid		ar before the filing o	of the petition in b	ankruptcy, or a	greed to be pai	amed debtor(s) and that d to me, for services render is as follows:	ed
	For	r legal services, I	I have agreed to acc	ept			<u> </u>	\$3,500.00	
	Prid	or to the filing of	this statement I have	e received			<u> </u>	\$3,500.00	
	Bal	lance Due					<u> </u>	\$0.00	
2.	The	e source of the c	ompensation paid to	me was:					
	\(\sqrt{1} \)	Debtor	Other (specify	y)					
3.	The	e source of comp	pensation to be paid	to me is:					
	√	Debtor	Other (specify	y)					
4.		I have not agre	ed to share the abov	ve-disclosed compe	ensation with any	other person u	nless they are r	members and associates of	my
		_	to share the above-d	-		-		t members or associates of ation, is attached.	my
5.	In r	return for the abo	ove-disclosed fee, I h	nave agreed to rend	der legal service f	or all aspects o	f the bankruptc	ey case, including:	
	a.	Analysis of the bankruptcy;	e debtor' s financial s	situation, and rende	ring advice to the	e debtor in dete	rmining whethe	er to file a petition in	
	b.	Preparation ar	nd filing of any petition	on, schedules, state	ements of affairs	and plan which	may be require	ed;	
	C.	Representatio	n of the debtor at the	e meeting of credito	ors and confirmati	ion hearing, and	d any adjourned	d hearings thereof;	
6.	Ву	agreement with	the debtor(s), the ab	ove-disclosed fee d	does not include t	the following se	rvices:		

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B2030 (Form 2030) (12/15)

Filing fee plus Costs & Expenses. Motion to Extend the Stay. Continued Meeting of Creditor Hearings, Addition of Creditor after Filing Petition, Motions to Avoid Liens, Motions for Relief from the Automatic Stay, Motions to Dismiss Case, Adverserial Proceedings & Discharge Litigation, Depositions, Asset Cramdowns, Objection to Proof of Claims, Certification of Stipulation Defaults, Motions for Plan Modifications, Motions for Reconsideration, Vacate Wage Orders, Praceipe for Discharge, Bankruptcy Chapter Conversions, Redemption of Property, Lexis & Pacer Research, Credit, Property, Judgements, & Liens Reports. The above legal services will be billed at a hourly rate of \$375 per hour per attorney

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

05/08/2025 /s/ Michael A. Cibik

Date Michael A. Cibik
Signature of Attorney

Bar Number: 23110 Cibik Law, P.C. 1500 Walnut Street Suite 900 Philadelphia, PA 19102 Phone: (215) 735-1060

Cibik Law, P.C.

Name of law firm